

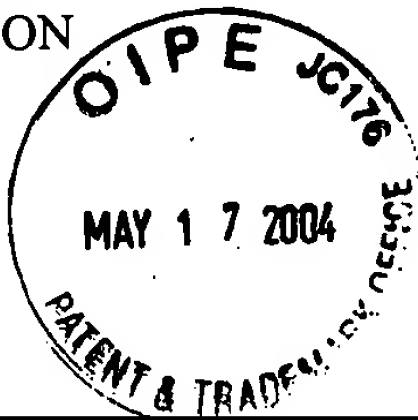
PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: MailMail Stop ISSUE FEE
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35844 7590 02/27/2004

PAULEY PETERSEN & ERICKSON
2800 WEST HIGGINS ROAD
SUITE 365
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Melanie I. Rauch (Depositor's name)
Melanie I. Rauch (Signature)
May 14, 2004 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/964,291	09/26/2001	Timothy R. Martin	KCC-15,832	1633

TITLE OF INVENTION: LOOP FASTENING COMPONENT MADE FROM THERMALLY RETRACTED MATERIALS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	05/27/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
JUSKA, CHERYL ANN	1771	442-100000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Pauley Petersen & Erickson
2. _____
3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Kimberly-Clark Worldwide, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Neenah, Wisconsin

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee☒ Advance Order - # of Copies 1

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☒ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized to charge any deficiency or credit any overpayment, to Deposit Account Number 19-3550 (enclose an extra copy of this form).

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(Authorized Signature) Reg. No. 40,924 (Date)

Melanie I. Rauch

5/14/04

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